

Dear Members of the Insurance and Real State Committee of Connecticut General Assembly:

My name is Sarah McKinnis. I am a resident of New Haven and am testifying to communicate my strong support for H.B. 6622: *An Act Concerning Prescription Drug Formularys And Lists Of Covered Drugs*. This bill would limit the circumstances in which a health carrier may remove a prescription drug from a formulary or list of covered drugs, or move a prescription drug to a different cost tier, during a plan year.

Healthcare costs are already incredibly high. I believe that healthcare is a human right and should not be reserved as a commodity for the wealthy and privileged. However, this practice of allowing health insurance carriers to switch the coverage and cost of drugs during a plan year makes it even more difficult for countless CT residents to access their medications. Nobody should be denied coverage for a medicine mid-year or face obstacles in obtaining the healthcare they need due to a mid-year cost bait-and-switch by their for-profit insurer. 20% of CT residents responding to the Altarum Healthcare Survey in 2018 said that it is “difficult” or extremely difficult” to afford their prescriptions. They also responded most frequently that the reason healthcare costs are so high is that insurance companies are charging too much (<https://www.healthcarevaluehub.org/advocate-resources/publications/connecticut-residents-worried-about-high-drug-costsexpress-bipartisan-support-range-government-solutions>). These high costs can be a matter of life or death for some people, as it leads people to not fill prescriptions or to cut pills in half to make them last longer. Most of my family lives in Connecticut, and I do not want them or any other residents to have to worry about whether or not they can afford a medication they believed was covered at a certain level by insurance, but then changes.

Connecticut is already behind the curve. Several states, including the likes of *Texas*, have passed similar laws eliminating mid-year formulary changes. In Texas, a health insurer may modify a policy's prescription drug coverage only at a policy's renewal. It is incredibly disappointing that Connecticut lags behind its southern counterparts when it comes to progressive, equitable healthcare legislation.

In conclusion, I would like to restate my strong support for H.B. 6622. The citizens of Connecticut deserve better than to live at the whims of insurer dictates. Catching up with the rest of the nation on this issue is the least our state can do and I ask the committee to vote favorably on this important and necessary measure.

Thank you for your time and consideration.

Sincerely,  
Sarah McKinnis